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CONFIRMATION NO. 5870

<b>SERIAL NUMBER</b> 10/712,533	<b>FILING OR 371(c) DATE</b> 11/14/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1645	<b>ATTORNEY DOCKET NO.</b> 03495.0380
<b>APPLICANTS</b> Pierre Druilhe, Paris, FRANCE; Anne-Charlotte Gruner, Montrouge, FRANCE;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/04/2004</b>				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 28	<b>TOTAL CLAIMS</b> 41
<b>INDEPENDENT CLAIMS</b> 6				
<b>ADDRESS</b> 22852				
<b>TITLE</b> PLASMODIUM FALCIPARUM ANTIGENS AND THEIR VACCINE AND DIAGNOSTIC APPLICATIONS				
<b>FILING FEE RECEIVED</b> 1974	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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